

PROCEEDINGS OF THE BOARD OF HEALTH MEETING
TUESDAY, May 10, 2016
5:00 PM

Present: Jay Tibbetts, Joe Van Deurzen, Harold Pfothhauer, Richard Schadewald, Karen Sanchez, James Crawford

Excused: Susan Paulus Smith

Others Present: Debbie Armbruster, Rob Gollman, Ann Steinberger, Colleen Messner, Christine Davidson, Erik Pritzl, Executive Director for Brown County Human Services, Peter Denil, Lions Club, Erik Hoyer, Brown County Supervisor District 4 and Human Services Committee Chair, Patti Zich (minutes recorder)

1. Call to Order, Welcome, and Introductions

Jay Tibbetts called the meeting to order. Erik Pritzl, Executive Director of Brown County Human Services, Colleen Messner and Christine Davidson from Hearing and Vision Program, Peter Denil representing the Lions Club of Northeast Wisconsin, and Erik Hoyer, Brown County Supervisor and Human Services Committee Chair introduced themselves.

2. Approval / Modification of the Agenda

MOTION: To approve the agenda as presented.

Schadewald / Pfothhauer

Joe Van Deurzen would like to strike agenda item 9. He states this is a contract that the County enters into with Duke Energy and questioned if this was a health concern. Mr. Schadewald stated we needed to get clarity and that it is not a contract. He stated the Board of Health would have some influence on where that money would go.

MOTION CARRIED

3. Approval of Minutes of March 8, 2016

MOTION: To approve the minutes from March 8, 2016.

Van Deurzen / Pfothhauer

Jim Crawford requested changes.

MOTION: To approve the March 8, 2016 minutes as corrected.

Van Deurzen / Pfothhauer

MOTION CARRIED

4. Mental Health Initiative – Director Erik Pritzl

Erik Pritzl indicated his department is engaged in a mental health initiative which the County Board funded in November. The first part of the initiative was expanding mobile crisis services, which is a team or individual who treat the person experiencing what would be considered a crisis. It could be substance abuse related, mental health related, suicide, voluntary or involuntarily hospitalization. These services treated people typically by phone or at the crisis center which meant people were being brought places. It required people to move around. Instead of moving people, they talked about bringing the services to the person—to a school, home or police department. They expanded those services by one crisis counselor.

Mr. Pritzl continued that they also looked at detoxification services. As a rule the department was not funding detoxification services for persons who were incapacitated. They had issues with this in 2012 and their treatment center could not take people after that point. For that primary reason, if it's co-occurring with a mental health issue they could. People being seen were incapacitated and not receiving treatment other than an emergency room visit. This brought back some services in that area to address the chronic needs and incapacitation needs of individuals. That service is in place in terms of a contract and they are refining the terms of intoxicated versus incapacitated; who can be treated and who are they responsible to treat within the funding available.

The third part of the initiative is a Day Report Center which the Board also just approved will primarily serve the criminal justice population; people potentially in the jail setting who could be safely in the community because their offenses were non-violent offenses. They are probably in a low cash bond situation or barrier exits that are requiring them to stay in a jail setting where they are getting some mental health services. The Day Report Center would integrate the behavioral health services, substance abuse counseling as well as the criminal justice monitoring functions and vocational support and act as a check in center – not a residential center. That is out for proposals which are due back in two weeks. It will be July or August before that is in place depending on negotiations.

The fourth initiative is a Transitional Residential Treatment Center. It originally conceived of how they could better utilize the space at the Community Treatment Center to address the population with substance use needs, post-detoxification. They have to go through regulations and program applications and numerous steps to put that program in place. It could either be operated by Brown County or by a partnership with another provider.

The overall package is 1.1 million. Each piece, as they are brought forward is prorated for the amount of time they expect to be in operation this year. It is an attempt to bring those services to people without it requiring some of those other interventions. It connects to Health through the Community Health Improvement Plan and access to mental health services and gaps in mental health services.

Joe Van Deurzen asked if there were mental health crisis people working at the Jail or is that something they have to come out of the jail for. Erik stated the jail is responsible for mental health services within the jail. The problem they saw was when people were leaving jail. Who was picking that up? Who was helping them with that transition? One of the things he asked for in his budget was a position devoted to that transition. That person has started and they are developing protocols and trying to get more interest on the inmate side. They would like to engage them and figure out what services they are going to use when they leave and do a warm transition instead of a pamphlet, brochure or referral. There will be someone, if they are willing to work with them, to help them access services.

Jim Crawford asked about the Community Treatment Center. Erik indicated they have a 16 bed psychiatric hospital, 15 bed community-based residential facility which is a crisis stabilization non-secure setting and voluntary. They have a 63 bed nursing home which 61 beds are for residents with primarily behavioral health needs, and the other two beds are for emergency protective placements.

Dr. Tibbetts stated there was another mental health facility coming to town and wondered if they are cooperating with Human Services. Erik indicates they have talked to them and shared information.

5. **Environmental Division Update** – Rob Gollman indicated in the handouts is a brochure and a copy of a survey that we are going to be conducting with our operators. Those items will be included in our license renewal which runs from July 1st to June 30th of the following year. He states they are busy getting approximately 1,200 license renewals ready. Temporary events are also coming up.

Rob talked about the copper and brass issue. They are seeing a surge in some taverns serving a drink called the Moscow Mule which is typically served in an all copper mug. It is a violation of the Wisconsin Food Code to have any acid beverage or food in direct contact with copper or brass which is composed of copper and zinc. They also see beer being dispensed from beer faucets. Many of these old style faucets are chrome plated brass and when the chrome erodes it goes into the brass and that brass and copper is going into the drink. One of their sanitarians spoke at a WALHDAB meeting to bring to the attention to the rest of the state. They have been ordering people to discontinue use and go to a stainless lined copper mug. Replacing with all stainless units is cost effective for the operator and far more sanitary. Mr. Schadewald asked if we were informing the public. A discussion was held regarding different ways to get the word out to the community. Debbie indicated the Health Department would post something on Facebook.

Rob indicated they will be sending out the anonymous survey electronically. Rob also stated they are exploring the idea of a food safety advisory committee. They will include something with the renewal to see if there is interest. Rob has been working with Ann and a health educator on the rabies quality improvement project and new electronic rabies control order. We are also putting together a training PowerPoint presentation as there is

turnover. He is also looking into the ordinance. They currently refer problem cases to the District Attorney's office and it would be easier if they could issue citations.

Mr. Schadewald asked about staffing for outdoor festivals. Rob indicated we are currently full staffed with 7 inspectors. Rob is meeting tomorrow with his staff to discuss how they are going to cover the events. Rob talked about the merge between the Department of Ag, Trade and Consumer Protection and the Department of Health Food Safety and Recreational Licenses Divisions. We are currently agents for both of those State agencies and changes are coming.

Jim Crawford got a complaint on a vacant property on Green Bay Road and Rob and Jim agreed to discuss the complaint after the meeting.

6. Nursing Division Update – Communicable Disease, MCH – Vision and Hearing

Communicable Disease - Ann Steinberger handed out a summary regarding communicable disease. The flu season has peaked nationally and it has been milder in comparison to previous years. In regard to tuberculosis they have one person with active TB disease. He has now completed his medication. Ann states Elizabethkingia as of last week; there were 60 cases of this in 12 counties in Wisconsin. None of them have occurred in Brown County. There 2 cases consistent with the Wisconsin outbreak strain outside of Wisconsin; one was in Michigan and the other was in Illinois. The source of these infections is still unknown. Wisconsin Department of Human Services and the Center for Disease Control (CDC) continue to investigate the outbreak. As far as the Zika virus disease, cases reported were 472. They are sending specimens down to the CDC and the State and they have all come back negative. Ann also indicates they are notified of new HIV cases. There is a nurse that works with Partner Services and they have cases of newly diagnosed HIV. They work with the individual, make sure they are aware of the services and encourage testing of their partners. They are also part of a group of infectious disease providers which talks about what is going on. If there is any information that is passed along to them from the State, they send out an email to those involved with infectious diseases.

MCH – Vision and Hearing - Colleen indicated Peter Denil from the Lions Club contacted her with a proposal to partner with them to use a device they have for vision screening. Last year in Brown County we screened 12,293 children for vision problems. They screened the targeted grades of 4K, 5K, first, third, and fifth. For hearing, they screened 7,267 children for hearing issues with the targeted grades of 4K, 5K, and first. They go into 70 different schools within Brown County. For hearing screening, they currently utilize an Audiometer, OAE (Oto Acoustic Emissions) and Oscope. For vision screening, they utilize visual inspection of eyes, Snellen Eye Charts and a variety of other charts for different developmental levels and language barriers. They use a Random Dot E screening as needed when unsure about eye alignment issues. They do near vision chart by request and will screen for color vision by request. For years, and continuing to this day, the Snellen Eye Chart has been used to measure visual acuity; how "sharply" we see letters from 10 feet away. This is only one of a battery of tests utilized by eye care professionals, and the primary chart used in pediatric vision screenings. It is an industry standard but it is sometimes difficult to administer to small children. It can be subjective and is not foolproof.

The Lions Club had purchased 10 cameras for Northeast Wisconsin. It is a computer assisted Photorefractor / (auto refractor) which uses low level infrared light to the retina, taking 23 camera shots of the eye in less than 2 seconds. The measuring principle is based on photo-retinoscopy. From a distance of three feet (the camera lets the screener know if the distance is too far away or too close). An infrared light is projected through the pupils onto the retina. Depending on the refractive error, the reflected light forms a specific brightness pattern within the pupil. The assessment is non-invasive and the student feels nothing. The child simply sits down and looks into the camera. It takes the series of photos of the child's eyes using infrared light, all within no more than two seconds. By analyzing those images, it is able to determine if their vision is age appropriate and the device will instantaneously display the name of any likely problems. In just seconds, Spot provides immediate, comprehensive, and reliable screening results. A one-page summary can be printed, allowing for further analysis and informed decision making about the need for a follow-up examination and treatment by an eye care professional. Either the child will be in range or out of range and then the child should have a comprehensive eye exam by an eye care professional.

They piloted this in spring and just got the results back. Christine Davidson gave examples of the Photorefractor passing the child but their screen did not pass the child. They sent a letter home to the family and they did bring the child to the eye doctor and the child did get glasses. They also had passed a child on the charts but the Photorefractor said this child needed an exam and did indeed end up with glasses. It is not 100% but it is a screening tool.

Colleen demonstrated the Photorefractor on a member of the Board. Peter Denil from the Lions Club indicated they are screening the younger children right now. They have approached a medical college to be a research partner so we can do a validated research study and comparative analysis. Peter indicated it will screen 95% of the population. Their proposal is they would lease the camera to the County for a nominal fee. The County would have to pick up maintenance, if any. The cameras are about \$7,000-\$8,000 each.

Debbie Armbruster stated we just secured an adult immunization grant. They decided they wanted to work on influenza as it impacts not only the adults but the family as well. This is not giving vaccines. It involves going to entities which provide influenza vaccines and make sure they get the information in the Wisconsin Immunization Registry (WIR). She indicates they need to increase their adult influenza rate by 8%, which means 16,100 more adults need to get it in Brown County. A number of providers are not putting the information into the WIR and they will do a lot of promotion. They also need to update the deceased in the system. They also purchased some adult influenza vaccine for a very reasonable cost and will be giving out 500 doses at least.

Debbie also states they are having a This is Public Health Event and gives credit to Anna Destree for coming up with the idea and her entire department has embraced this. They have secured Shopko Hall on October 15th. Debbie indicates they are an unknown entity who does a lot for this community.

Debbie also reported that the Health Department will be having more mass clinics. By doing the mass clinics they don't have to ask for insurance information so they can give to everyone and they will reach more kids and adults. They have secured dates for mass clinics at St. Willebrord Parish, Back to School Store, Head Start Days and WIC program. They will also be giving immunizations at the "This is Public Health" Event. They will be meeting with schools to talk about being able to hold clinics in the schools. The State is encouraging them to work with the Aging and Disability Resource Centers. They have a great relationship with ADRC will meet to services.

Debbie states they recently started the ages and stages boards. The board goes through many different ages from 2 months to about 48 months. It goes through the social emotional part of it but also the developmental part of it. Their nurses go to local events to use the screening tools so parents are getting more knowledge about what their child can or cannot do. They score these questionnaires and then will refer to the appropriate source along with their primary provider. Mr. Schadewald asked if we offer immunizations to county employees and Debbie indicated not if they have health insurance.

7. Comments from the Public

William Acker, 3217 Nicolet Drive, Green Bay, WI. Mr. Acker presented a critique of what Jim Crawford spoke about at the last Board of Health meeting which is an article from an industry and funded report by the American Wind Energy Association and the Canadian Wind Energy Association. These associations mission of this industry is to promote the growth of wind power. Bill submitted two critiques that were done on that document and Mr. Acker's own critique which mostly focuses on what constitutes a Nocebo Effect or Somatoform Disorders.

Jim Vanden Boogart, 7463 Holly-Mor Road, Greenleaf, WI. Mr. Vanden Boogart stated their group's concern and comments have to do with former Health Director Chua Xiong's decision regarding Shirley Wind, including her review of the documents submitted to her, and those who assisted her in that review. Mr. Vanden Boogart stated the statements being made on behalf of Brown County Citizens for Responsible Wind Energy (BCCRWE) and its members are based on the best information available to them, and they are not a personal attack against Chua Xiong or others involved but rather, their intent is to present evidence that demonstrates that Chua Xiong's conclusion regarding wind turbines and health concerns lacks validity and that her conclusion was based on a very flawed process by which submitted evidence was selectively reviewed and inconsistently weighed.

He states BCCRWE was very involved in submitting documents to Chua Xiong and the Board of Health, documents which, in their opinion, provided broad and compelling evidence demonstrating the known potential for adverse human health impacts from industrial wind turbines sited in proximity to human populations.

In support of the evidence submitted earlier by Susan Ashley in the "Blue Binder", he states they submitted additional credible evidence from world-recognized experts, including peer-reviewed papers, health impact studies of wind project residents, expert witness testimony from several recent court cases regarding health impacts from wind turbines, papers from professional acoustical conferences, and much more. He states these documents provided a full spectrum view of the evidence necessary to make the determination that wind turbines are known to have the potential to cause adverse health effects for some residents living in their environs. Jim continues that despite all of the evidence at her disposal, Chua Xiong concluded that there is not a relationship between wind turbines and health concerns, and therefore, concluded that the Shirley Wind turbines are not a human health hazard. It is their opinion that in arriving at her conclusion regarding Shirley Wind, Chua Xiong failed to perform her due diligence by failing to review the majority of the evidence submitted to her; failing to consider the entire body of evidence, electing to only conduct a literature review that employed highly restrictive selection criteria, and that was not based on any Board of Health directive or any requirement imposed on her, failing to apply her own self-limiting selection criteria to 3 of the 5 documents that she *did* select as *having merit*, while using those same criteria to reject *every* document submitted to her by experts across the globe demonstrating a relationship between wind turbines and health concerns, characterizing them as being "*without merit*" for one reason or another, failing to broaden her understanding of the issue by speaking with experts having extensive experience with, and knowledge of, the potential health impacts from wind turbines; failing to accept an offer from Richard James to set up a Skype discussion and an offer from Carmen Krogh to make a presentation, failing to speak with Board of Health members regarding their five years of experience dealing with the issues at Shirley Wind that led to their human health hazard declaration, failing to meet with BCCRWE who had been working with affected residents and researchers, failing to interview most residents who were affected, failing to spend any time in the abandoned homes, failing to select an individual to assist her who had the specific education or experience, failing to conduct her ongoing review process with transparency or accountability, failing to allow the Board of Health to review her findings or provide input, failing to publicly acknowledge her own repeated personal adverse health impacts experienced at Shirley Wind, failing to employ the precautionary principle to protect the health of Shirley Wind residents.

Mr. Vanden Boogart continues that after making her determination, Chua Xiong failed to answer questions posed by Board of Health Vice Chairman Dr. Jay Tibbetts at the January 12, 2016, Board of Health meeting, failed to make herself available to meet with interested parties, gave a PowerPoint presentation to the Human Services Committee that appears to have been prepared by Jeanne Hewitt, rather than herself, describing the process that was used to review documents and reach her conclusion. Mr. Vanden Boogart continues she failed respond to certain questions asked of her by Chairman Patrick Evans at the January 27, 2016, Human Services Committee meeting and answer questions asked of her by the public at the January 27, 2016, Human Services Committee meeting. Mr. Vanden Boogart states she failed to appear at the February 24, 2016, Human Services Committee meeting and March 8, 2016, Board of Health meeting. She further states Ms. Xiong resigned from office, effective March 18, 2016, making herself unavailable to respond to any of the many unanswered questions.

Mr. Vanden Boogart alleges that emails paint a picture of a Health Director, who found it difficult to find time to review the submitted documents, delegated much of the document review to Carolyn Harvey and relied on Jeanne Hewitt for direction in reaching her decision. He believes Ms. Xiong may have been influenced by a much-discredited document written by pro-wind propagandist Mike Barnard. It is Mr. Vanden Boogart's belief that Chua Xiong seemed to be more concerned about the cost and difficulty of winning a lawsuit than about protecting the health of Shirley Wind residents. BCCRWE is of the opinion that Chua Xiong failed the test of due diligence and that her conclusion is without merit, and should be formally dismissed. Mr. Vanden Boogart also believes several experts who have reviewed the documents and evidence that Chua Xiong had have come to the same conclusion, and have publicly stated their positions including Robert Rand, Jerry Punch, PhD, Stephen Ambrose, Steven Cooper, Paul Schomer PhD, Richard James, Dr. Robert McMurtry, and Carmen Krogh. Mr. Vanden Boogart states in these documents is a Professional Caution issued by Institute of Noise Control Engineers member Robert Rand regarding Health Director Xiong's disregard of his professional judgment regarding adverse health conditions at Shirley Wind. Mr. Vanden Boogart states BCCRWE is requesting that the Board review the facts presented and take the necessary steps to have former Health

Director Chua Xiong's determination regarding Shirley Wind formally dismissed, and to take action to protect the health of adversely affected Shirley Wind residents.

8. **Shirley Wind Health Complaints**

Jim Crawford would like to hear the public at every meeting and the progress of the Shirley Wind story to keep apprised. Jim talked with Ben Schauer and Ben Jordan of Shirley Wind. He also talked to another neighbor. Jim states Ben Jordan was very open in attempts of Duke Energy to be a good neighbor. He states whether you believe in the infrasound theory or you believe in the Somatoform disorder theory that the Canadian medical team put together, there are parts that overlap. He states one is noise. Noise you can hear above the audible range. Another is flicker. He states Duke Energy shuts down the turbines as best they can when flicker is hitting a house or chicken coop if people complain about it. Jim was curious why some turbines were shut off during a great wind and that is the reason. Jim also states that Ben Jordan told him that the Town of Glenmore with Duke Energy evaluated many of the neighbors for stray voltage last year. Jim continued they found two did have stray voltage. He states Duke Energy went further and had two different electrical companies look at each of the 13 sites and asked the electricians to figure out what was the cause of the stray voltage. On a farm that had stray voltage and in the record as a complainant, the stray voltage was from a faulty switch in his barn which would easily account for loss of milk production. At a second site, which was Ben Schauer's, they also found stray voltage. Jim indicated Ben stated his sons had panic attacks and his wife sleeps in the basement because she can't get good sleep on the second floor where their bedroom is located. Ben also said he is not affected by whatever it is that is affecting his wife's sleep and his son. He has three children and his middle one is not affected. His older son is affected and he thinks the youngest one may be having some panic attacks. Ben had an electrician come in and it was determined that the fuse box was improperly grounded in the basement of the house and he had it fixed. They were getting shocks in the house. Jim believes you have to go case by case in this controversy between the two theories and update the stressed population. He believes it is a good idea to do stray voltage studies on an on-going basis. Jim states Ben really supports a study of these two theories and he knows it will take time.

Jim states in the Canadian study they state it's a somatoform disorder and it is alleviated by a course of psychotherapy much like you treat a soldier with PTSD coming back from Iraq. Jim states he talked to his neighbor who lives in a new house next to the turbines. Jim states he has had these problems. He is in the record and his doctor suggested this course of treatment which would solve his problems. Jim will keep investigating individual cases if they come forward on the public record. He states the Board needs to pursue an outline for a study and then get the cost of it and they need to do it now. He thinks that is the Board's next step.

Richard Schadewald wondered how we are receiving complaints. He also states we should continue to receive new information.

MOTION: To suspend rules to hear from interested parties

Schadewald / Crawford

MOTION CARRIED

Ben Jordan from Duke Energy states they have a claim resolution procedure with the Town of Glenmore. Each month they document all the complaints that come into Shirley wind, how they can adjust them and they are on file within the Glenmore Township.

Jim Crawford stated while he was there, a flicker complaint came in from Cindy Ossman who is the Clerk of Glenmore. It wasn't on her kitchen window. It was on the corner of her house. Ben recorded it and within 7 days had to tell the Town of Glenmore of a complaint. Jim believes that a computer is adjusted so that the turbine turns off when the sun is at that exact position throughout the year. Richard Schadewald asked Ben Jordan if that was correct. Ben Jordan stated, "There is a computer model algorithm that goes into where the alignment from the sun to the turbines to the home is. We are able to go and adjust those times as needed." Ben states there is a complaint resolution procedure with the Town of Glenmore.

Jim Vanden Boogart stated the complaint resolution procedure is probably outlined in the condition use permit. Jim states shadow flicker that is not a big part of the discussion. Jim wondered if Duke Energy proactively goes out and seeks opportunities to adjust their algorithms to make sure that doesn't happen. Last year he logged an abundance of shadow flicker on homes. It seems to be only in response to complaints.

Barbara Vanden Boogart stated shadow flicker isn't usually associated with medical problems, however it does cause and create medical problems for some individuals. There was a complaint in Shirley Wind Project by one of the residents, who no longer lives in her home, of her getting migraines from shadow flicker that was coming into her kitchen window on a regular basis. She is not alone in having migraines triggered by a flickering light. There were videos done on shadow flicker and they are posted on line.

Bill Acker, Nicolet Drive - Bill stated the Town of Falmouth, Massachusetts has been fighting over the illnesses from two wind turbines installed by the town. When they had the health effects, the alderman immediately took a vote and agreed to take down the wind turbines. The town found out they had to raise taxes in order to remove those units which the town objected so they put it to a town vote. The vote was not to take them down. The families that were ill sued the Town of Falmouth, Massachusetts and the town zoning board reviewed that process and agreed that the people's illnesses were credible. They decided to take down the first of the two. The second wind turbine, which came on line about a year later, is going to go through that same process. For Wind 1, the town zoning board decided to take it down and decided that the people's illnesses were credible.

Jim Vanden Boogart said he checked the low frequency measurements there in the IFLN study and they were down 2.7 hertz and it is in the 0-1 hertz range where people are susceptible to low frequency. He states that's the peak nausogenicity range. At Shirley Wind it was down to .5 maybe a little less at times. Falmouth was .7. The acousticians that tested there, Ambrose and Rand, one of which tested here to, happen to be sensitive individuals to that and they both got sick at Falmouth. Jim states when Rand tested at Shirley with PSC he got sick and it took him a couple weeks before he felt better because he was in the project for three straight days. He stayed overnight in the homes to personally see what would happen to himself. He suffered for that but that was his testimony and it is in a peer reviewed document.

Sandy Johnson, 1893 Wayside Road, Greenleaf Wisconsin. Sandy has two PDF's from Jim that now hosting landowners are stepping forward in Texas. There are two hosting landowners who have filed lawsuits on Duke and in terms of the effects on them and their families. She has spoken to people in Blue Skies Green Field. Sandy called a man who has three wind turbines on his land. He inherited them from his father. She asked him if he was concerned about saying things publicly. He said he was not afraid because they committed fraud by saying it would sound like the hum of a refrigerator and it is not going to be a health issue. Sandy did not want to give his name. She states it isn't just Shirley Wind. It is in other areas of Wisconsin as well.

MOTION: To return to the regular order of business

Schadewald / Van Deurzen

MOTION CARRIED

9. Discussion on Duke Energy's Annual Payment of \$26,000 to Brown County

Jim Crawford thinks Duke Energy pays the County \$26,000 a year and the Town \$26,000 and believes there is money divided up for residents within a half mile. Jim thinks the Town of Glenmore could use the County's \$26,000 to solve or investigate this problem. Mr. Schadewald stated this money was not part of a contract. It is a voluntary payment. It goes into our planning and development budget with no specificity. Mr. Schadewald inquired and was told it was already put in the 2016 budget. He pointed out that we are going into the 2017 budget and is there another use for this money.

Jim Vanden Boogart indicated it was in the conditional use permit between Duke Energy and the Town of Glenmore. It is required to be paid for the life of the project. It is \$4,000 per megawatt, 1/3 to the town, 1/3 to the residents within a half mile, 1/3 to the County. The County is going to get it forever, no matter what.

Jim Crawford indicated that we have kicked around a study between these two theories by a medical organization or whomever and wondered if there were other ideas to help the situation. One thing might be one of the Board of Health members goes forth and talks to an expert group that might conduct a study to answer some of the questions between the two theories, which is more valid. Richard Schadewald indicated the starting point is "does the Board of Health want to ask Brown County to allocate the \$26,000 in the 2017 budget for our utilization?" Jim indicated he was giving some possible uses of the money that might be more helpful than putting it in the county budget. Jim has heard that a study could cost a million dollars. Some answers are key and they might be obtained if the seed money is used to possibly get a federal grant that might be very useful to a research group to assign a grad student to do this. That is option 1. Option 2 is return some or all

to the Town of Glenmore as a compliance fund so they could hire a local retired electrician to go around and look for stray voltage and maybe update symptoms. It could be used to pay co-pays that the town could be divided to the people who are getting this treatment in theory B. It could be used to hire a small claims attorney to handle small claims courts violations of the permit. Jim thinks the Town would decide what to do with the money. But we would just stipulate that it has to be used to help the wind turbine issue. Their uses of the money are more useful than going into the county's budget. Richard Schadewald indicated that what he is looking for first is, does the Board of Health feel comfortable asking Brown County to allocate the \$26,000 that Duke Energy gives us as an annual payment that for use in our efforts to resolve the Shirley Wind Farm health concerns.

MOTION: The annual payment by Duke Energy to Brown County is allocated to the Health Department and Board of Health for towards resolution of the Shirley Wind Health Concerns. Schadewald / Van Deurzen

MOTION CARRIED.

10. **Correspondences** - Jay Tibbetts has two letters. Carmen Krogh sent him a letter to submit to the Board. He has also been in communication with a guy named James Prostman who has unique skills in reading and understanding reading mechanism and cognitive behavior.

11. Interim Director's Report

Debbie indicated Dr. Tibbetts wanted a report on the hiring of the Director position. Debbie said there are 11 applicants and they were working on setting up interviews. Dr. Tibbetts also wanted Debbie to give what the requirements are for a Health Director. We are a Level 3 Health Department and it would be according to what the Level 3 requirements would be. He also wanted to know about the move. Debbie indicated that the state lab person did submit their requirements for the lab and now Facilities Management has to secure a contractor to make a bid as far as what those costs will be. They are putting an RFP to hire an architect. To her knowledge they have not received it. The County Executive is looking at all possibilities.

Richard Schadewald states the whole thing is about reducing the footprint. So they don't want to acquire any new property. It is a constantly evolving plan. Does it make sense? Do we spend \$80,000 or put them somewhere in our current property for less than \$80,000.

12. All Other Business Authorized by Law

Richard Schadewald heard a story about needles in parks down in Neenah and wondered if we had a policy and he wanted the board to know we are on top of it. Debbie stated Ann Steinberger got containers for most of the parks and is working on a policy for them.

13. Adjournment / Next Meeting Schedule

MOTION: To adjourn meeting

Crawford / Van Deurzen

MOTION CARRIED

NEXT MEETING:

July 19, 2016 5:00 PM